Hospital	City / Town		County	Teaching Status [1] Fiscal Year		d Number of Months Data	
Harrington Memorial Hospital	S	Southbridge	Worcester	Nonteaching	09 / 30	12	
Financial Performance Indicators	FY01	FY02	FY03	FY04	FY05	MA Industry Median FY05	NorthEast US Median FY04 [2]
Profitability Operating Margin Non-Operating Margin Total Margin Operating Surplus (Loss) Total Surplus (Loss)	-1.60% 5.92% 4.32% (\$759,020) \$2,050,712	1.13% -0.77% 0.35% \$847,196 \$172,134	0.80% 2.41% \$891,420	6.85% 4.31% (\$1,500,889)	0.83% 4.87% 5.69% \$522,862 \$3,604,031	1.70% 1.25% 3.24% 	not available
Liquidity Current Ratio Days in Accounts Receivable Average Payment Period	1.91 62.53 29.66		2.19 67.61	2.89 62.91	4.00 50.42 23.62	1.58 41.79 51.91	49.17
Solvency/Capital Structure Debt Service Coverage (Total) [3] Cashflow to Total Debt [4] Equity Financing	89.02%	88.72%	89.26%	90.73%	92.07%	3.23 17.53% 41.74%	16.38%
Other Total Net Assets Assets Whose Use is Limited Net Patient Service Revenue [5]	\$68,427,827 \$47,027,515 \$41,335,534	\$46,250,541	\$52,234,681	\$55,733,539	\$90,795,284 \$66,661,310 \$57,091,797	 	  

## FY05 filing based on hospital's audited financial statements

- Notes:
  [1] According to the Medicare Payment Advisory Commission (MEDPAC), a major teaching hospital is one with at least 25 FTE residents per 100 inpatient beds.
  [2] NE US Median data from The "2006 Almanac of Hospital Financial & Operating Indicators." The Center for Healthcare Industry Performance Studies (CHIPS)/St. Anthony/Medicode INGENIX.
  [3] Blank values indicate a facility with no current long term debt in the period covered.
  [4] Blank values indicate a facility with no long term debt net of current portion in the period covered.
  [5] Net Patient Service Revenue includes Premium Revenue.

Data Sources: FY01 data is drawn from DHCFP-403 Cost Report, Schedule 23. FY02 - FY05 data drawn from DHCFP annual filing.

CAVEATS: FY01 - FY02 data is unaudited but reviewed by the Division for consistency with the Audited Financial Statements. FY03-05 data is reconciled to Audited Financial Statements. DHCFP filings may not reflect all of the financial resources available to the hospital resources available through associations with foundations or parents/affiliates. Financial information must be interpreted within the context of other factors, including, but not limited to, management plans, reimbursement changes, market behavior, and other factors affecting performance.

Comments: Hospitals may also submit comments which further explain or clarify specific data items. Any such disclosures are shown below.